

### **Childhood Diabetes**

Presented by:

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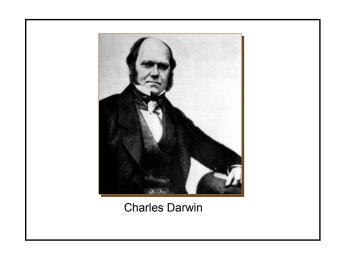
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## DIABETES AMONG YOUTH



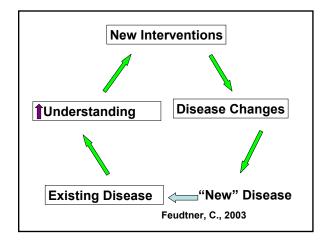
# Division of Diabetes Translation Centers for Disease Control and Prevention REDUCING THE BURDEN OF DIABETES

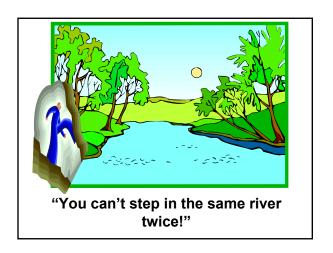


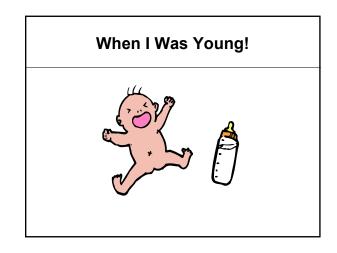


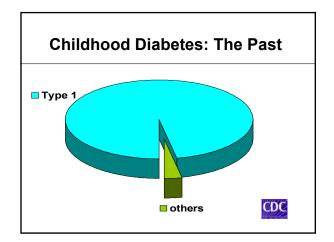
"Bitter Sweet: Diabetes, Insulin and the Transmutation of Illness" Feudtner, C. 2003



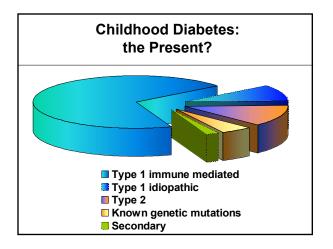




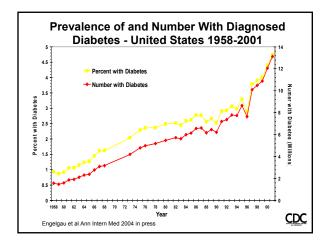












### **Every 24 Hours**

- New Cases 3,600
  - Deaths 580
    - Amputations 225
      - · Kidney Failure 120

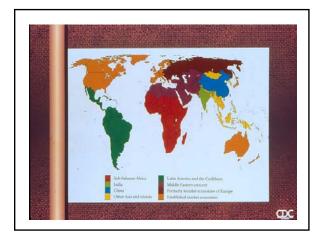


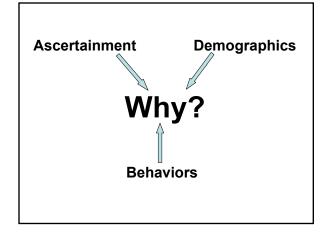
· Blindness - 55

# Life-Time Risk Of Diabetes (Born in 2000)

- Overall 1/3
- · AA/Hispanic 2/5
- Hispanic Female 1/2

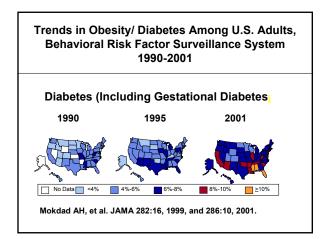
Narayan, V. et al JAMA 10/03

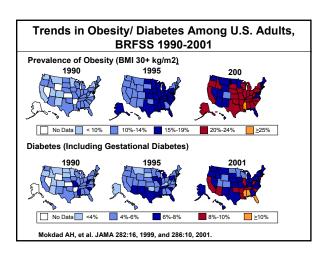




### **Demographics**

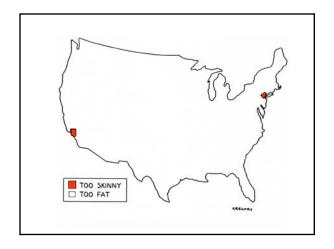
- · More people
- · Older people
- · More populations at risk















"Genetics May Load

The Cannon, But Human

Behavior Pulls The

Trigger."

E. Joslin, MD 1924

### **Agenda**

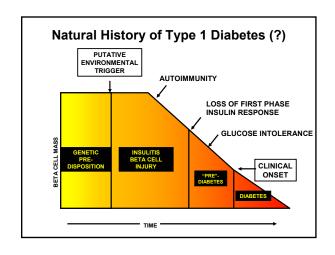
- · Charles Darwin
- · Diabetes in the U.S. and World
- · Childhood Diabetes
  - · Type 1, Type 2, Can We Tell
- Challenges
- Summary

### Type 1 Diabetes - Then

- · "All" Diabetes < 20
- · Pretty Sudden Onset
- · Strong Family History
- · Real Difficult to Manage ("Brittle")

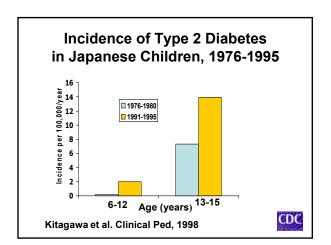
### Type 1 Diabetes - Now

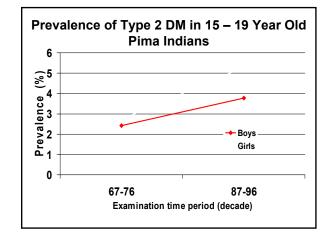
- Absolute insulin deficiency; probably an autoimmune disease
- · Slow onset of basic disease process
- 70% "sporadic," i.e. no F. Hx.
- · Good control possible

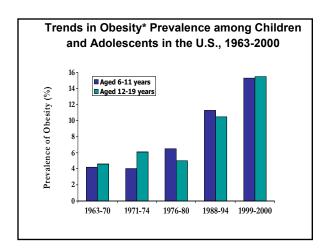


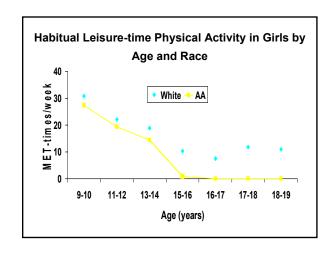
Type 1 Diabetes - Incidence (#/100,000/Yr.)				
<u>COUNTRY</u> Finland	<u>90s</u> 30	<u>2010</u> 58		
"USA"	14	37		
Hungary	6	20		
Japan	2	8		
China	1	3		

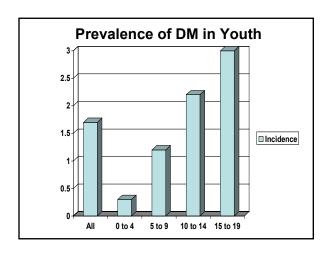


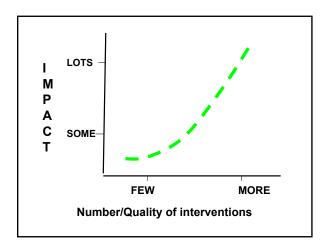


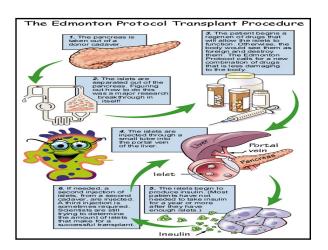






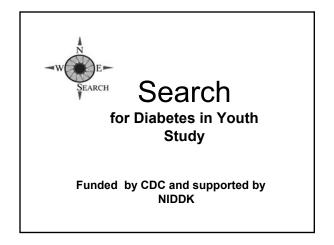


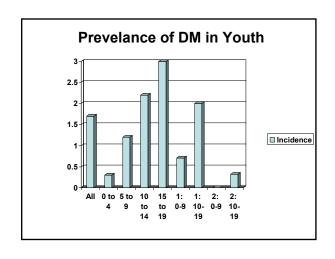




### **Risk Factors for T2D in Children**

- · Obesity
- · Lack of physical activity
- Die
- · Genetic predisposition
- · Exposure to diabetes in utero





### Incidence of DM in Youth

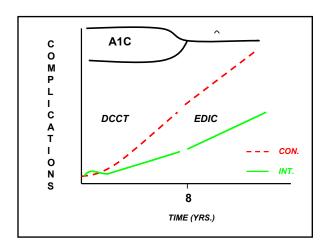
(#/100,000/Year)

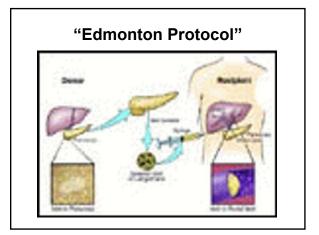
- · 1224 New Onset Cases (5.28 M Children)
- · By Age:
  - 14.1 (0-4 Yrs.); 24.7 (10-14); 32.6 (10-14); 20.7 (15-19)
- · Standardized Incidence Ratio (SIR)

<u>AGE</u>	GE <u>O/E</u>	
0-9	491/317	1.6
10-19	733/546	1.3

### Type 1

- · "Imprinting"
- · "Cure" Islet Cell Transplantation



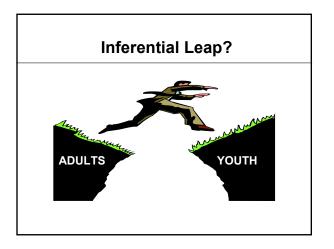


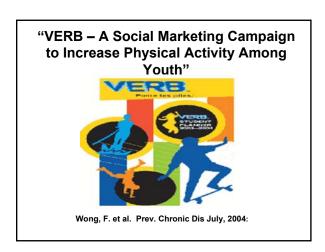
### Type 2

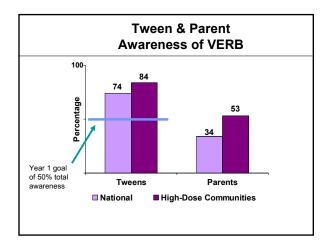
- · Care "vs." Cure "vs." Prevention
- · Prevention Some Examples
  - · VERB
  - PLANET HEALTH
  - · SCHOOLS
    - · "Education"
    - · "Policies" Pouring Contracts

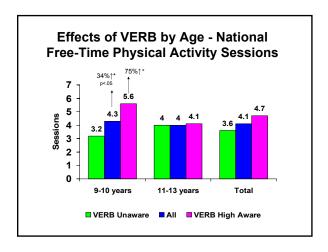
### AII!

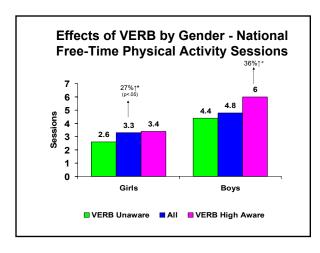
- Impaired Glucose Tolerance +/- Others
- · =/> 18 Years of Age





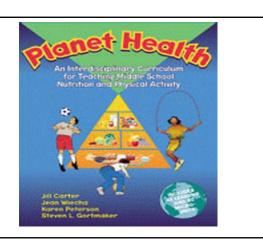






### Campaign "Success Factors"

- ✓ Hire the "best kids marketers."
- Negotiate media partner added value opportunities.
- Know the audience: conduct extensive formative research.
- ✓ Be a "for tweens/by tweens" campaign.
- ✓ Use positive "can do" messaging.
- ✓ Test concepts & messages w/audience.
- Continuously evaluate & adjust campaign strategies.



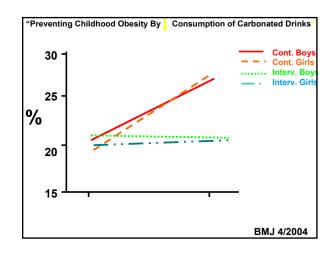


- · 479 Grade 4 Students (91% AA); 6 Intervention vs. 8 Control Schools
- Eat Well/Keep Moving Program Taught by Teaches Over 2 Yrs. In "Regular Classes;" Links Provided to Other Programs, e.g. School Food Services, Wellness Programs; Activity Programs; Guidance to TV Viewing;
- ·\* In Intervention Grp Knowledge; Consumpt of Fat/Sat. Fat; Fruit/Veg. Intake; Fiber Intake; TV Viewing (SI.); Vigorous P.A.; Weight (SI.)

### "Preventing Childhood Obesity by Reducing Consumption of Carbonated Drinks: Cluster Randomized Controlled Trial"

- · 644 Children, aged 7-11 Years
- Focused Ed. Prog. on Nutrition 1 Yr.
- 0.6 Glasses/3 Days Interv. Grp.
- 0.2 Glasses/3 Days Control Grp.0

BMJ 4/2004







### We Are Not Paralyzed!



### Frank Vinicor

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